SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective <u>1-1-2012</u>

	(1)		(2) Annual Premium	(3) Percent
	Coverage	•	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobilo Lighilit	••		
1.	Automobile Liabilit Private Passenger	.y		
	Commercial	-		
2.	Automobile Physica	- Domoso		
۷.	Private Passenger	ii Dailiage		
	Commercial	-	· · · · · · · · · · · · · · · · · · ·	
. 3.	Liability Other Than	n Auto		
		- Auto		
4.	Burglary and Theft	_		
5.	Glass	-		
6.	Fidelity	· -		
7.	Surety	_		
8.	Boiler and Machine	ry _		
9.	Fire	_		
10.	J	_		
11.		_		
12.		_		
13.	Commercial Multi-l	Peril _		
14.	Crop Hail	_		
15.		Restaurant ogram	507,498	+5.0
	<u> </u>	f Insurance		
			ritories) or certain classes? If	
App	lies to all BOP/Resta	urant Program si	ublines, territories, coverage	s, classes, etc.
			ates of an advisory Organizati	
_Revi	sed our company Lo	oss Cost Multiplie	rs and company LCM excep	tion pages.
	djusted to reflect all p			
			ch will result from application	of new rates.
			ch will result from application	of new rates.
			ch will result from application	of new rates.
			Continental West	ern Insurance Company
			Continental West	
			Continental West Name	ern Insurance Company of Company
			Continental West Name Lisa S	ern Insurance Company

SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective <u>01/01/2012</u>

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		,
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		• • • • • • • • • • • • • • • • • • • •
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other CDP Program	\$2,166,292	1.33%
13.	Line of Insurance	\$2,100,232	1.33 / 6
No	filing only apply to certain territory		
	description of filing. (If filing followerse to the Liability Base Rates.	vs rates of an advisory Organizati	on, specify organization):
	1:	pages pyrone years years and the second seco	10-10-10-10-10-10-10-10-10-10-10-10-10-1
	djusted to reflect all prior rate chang hange in Company's premium level		of new rates
	nange in Company's premium level	which will result from application	of new rates.
	•		
	•		ern Insurance Company
		Name	of Company
		Janel Myers	- Research Analyst
		Off	icial - Title
	100		

FORM (RF-3)

Change in Company	's premium.	or rate	level produced	by rate re	evision
effective 12/02/2011	Tarana a			*	

	9.45	/03	:/2\
•	(1)	(2)	(3)
**	Coverage	Annual Premium	Percent Change (+or.) **
;	Coverage Automobile Liability Private	Volume (Illinois) *	Change (+or-) **
•			
	Passenger		Allemania - marina de la compania del compania del compania de la compania del la compania de la compania della
	Commercial		
	Automobile Physical Damag		
	Private Passenger		. Annual la companya de la companya
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass	- minigan managan mana	
	Fidelity		
	Surety	·	
	Boiler and Machinery		
1	Fire		****
).	Extended Coverage		
۱.	Inland Marine		
2	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other Commercial Excess Liab	4,920,828	2.9
	Life of Insurance	, , , , , , , , , , , , , , , , , , ,	,
P :	Door filing obligabbly to corte	sin torritory (torritorior) or	cortain
	Does filing only apply to certa Classes? If so,	in terniory (terniories) or	Certain
	specify: NA		
	specify.		
	Brief description of filing. (If f	iling follows rates of an a	dvienni
	Organization, specify	iling joliows rates of art a	ici visci y
	organization):	We revised our excess	s rating factors, limit pricing factor
	and excess uninsured and undering	· AND	
	and excess uninsured and underin	sured motorist base rates.	
	*Adjusted to reflect all prior ra	to changes	
	**Change in Company's prem		It from application of new
	rates.		at nom application of new
	17153		
		ACUITY, A Mutual	Insurance Company
			ala di mini mala di mana manda mala di mana di mini di mana di mini di mana di mana di mana di mana di mana di
		Na	Insurance Company me of Company egulatory Filing Technician

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	02/01/2012	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		·
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail	·	
15. Other Commercial Property Line of Insurance	\$766,342	-5.50%
Does filing only apply to certain territory	(territories) or certain classes? If so, specif	y: <u>No</u>
Brief description of filing. (If filing follows revision filing designation number CF-20	s rates of an advisory organization, specif 09-RLA with revised company loss cost m	fy organization): <u>File to adopt loss cos</u> ultipliers.
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new rate	es. sualty Company of Wisconsin Name of Company
,	Chris G	ates- Operations Manager
		Official – Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate I	evel produced by rate revision effective	02/01/2012
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail	00.005.040	6.20
15. Other Commercial Property Line of Insurance	\$3,365,913	-6.20
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	No
	vs rates of an advisory organization, specify 2009-RLA with revised company loss cost mul	
*Adjusted to reflect all prior rate change **Change in Company's premium level v	which will result from application of new rates General Ca	s. sualty Insurance Company Name of Company
· .		• •
	Chris Gat	es - Operations Manager
		Official – Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	02/01/2012	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		*******
15. Other Commercial Property	\$5,541,136	-10.30%
Line of Insurance		
Does filing only apply to certain territory (erritories) or certain classes? If so, specify	: <u>No</u>
	rates of an advisory organization, specify 9-RLA with revised company loss cost mu	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level w	nich will result from application of new rate	s. nt Insurance Company
	<u> </u>	Name of Company
	Chris Gat	es - Operations Manager
		Official – Title

FORM (RF-3)

SUMMARY SHEET

	(1)	(2)	(3)
-	()	Annual Premium	Percent
-	Coverage	- Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		3
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
€.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
3.	Commercial Multi-Peril		<u> </u>
4.	Crop Hail	A	
5.	Other Dentist's Prof Liability Life of Insurance	\$1,008,719	+17.50%
•	Life of insurance		,
•	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: This ap	plies to all Dentists and Oral	Surgeons in all Illinois territories.
	Brief description of filing. (If f	iling follows rates of an a	dvisory
	Organization, specify		
	organization):		crease current manual rates,
	create a new specialty for dentist u		ne loss free and risk management
	discounts, offer first aid and corpora		
	*Adjusted to reflect all prior ra **Change in Company's premates.		It from application of new
	raics.	ProAssurance Wis	consin Insurance Company
		Mo	me of Company
	RECEIV	LaQuita Goodwin -	Compliance Analyst
			Official – Title

AUG 2 4 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

H29219D

(Change in Company's premium or rate	level produced by rate revision effec	tive December 1, 2011
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
•	Commercial		
3.	Liability Other Than Auto		
4. 5.	Burglary and Theft Glass		
3. 6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Earthquake	196,678	0.1
	Line of Insurance		
D (iling only apply to certain territory (ter	witeries) or cortain alocses? If so, she	oifu:
Does t	available in Alexander, Mass	ac Pope and Pulaski counti	eny.
INOL	available in Alexander, Mass	ac, r ope and r diaski count	<u> </u>
Brief o	description of filing. (If filing follows	rates of an advisory organization, spe	cify organization):
Wear	e making some revisions to our Indeper	ndent Homeowners Program that incl	udes modifications to our
	uake coverage. Nothing has changed fr		
* A	djusted to reflect all prior rate changes.		
	hange in Company's premium level wh		w rates.
		S	afeco Insurance Company of
			llinois (111-39012)
			Name of Company
			Swin Bassan Disaster - CState
			Craig Beeson, Director of State Operations
			Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

	LOB:	Commercial Property	
Change in Cor	mpany's premium or rate le	vel produced by rate revision effective	1/1/2012
	(1)	(2)	(3)
	(')	Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
	<u> </u>		
l. Automobile Lia	ability		
Private Pas			
Commercia			
2. Automobile Ph	nvsical Damage		
Private Pas			
Commercia	_		
B. Liability Other			
l. Burglary and T			
5. Glass			
6. Fidelity		17	
7. Surety			
B. Boiler and Mad	chinery	322,138	0.0%
9. Fire		677,312	-1.9%
). Extended Cov	erage	691,540	1.5%
I. Inland Marine	o.ugo	10,131	2.1%
2. Homeowners			
3. Commercial M	lulti-Peril		10000
4. Crop Hail			
5. Other	Earthquake	36,601	38.9%
. •	Line of Insurance		
			•
oog filing only on	anly to cortain torritory (torri	torios) or certain classes? If so, specify N/A	
bes illing only ap	pply to certain terniory (tern	tories) or certain classes? If so, specify N/A	
			·
rief description of	f filing. (If filing follows rate	es of an advisory organization, specify organi	zation):
	oss cost multipliers.		
1100101011011			
* Adjusted to ref	flect all prior rate changes.		
		ch will result from application of new rates.	
-			
		Universal Underwriters Insu	rance Company
		Name of Compa	
		·	-
		Heidi Bauer - Actuarial Rese	arch Associate I
		Official - Title	

FORM (RF-3)

Change in Company's premiu	m or rate	level produce	d by rate	revision
effective 02/15/2012			-	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger	441,686	0%
_	Commercial		
2	Automobile Physical Damag		
	Private Passenger	283,650	0%
	Commercial		
3.	Liability Other Than Auto		
4 .	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
13. 14.			
14. 15.	Crop Hail		
15.	Other Liab & Phy Combined	725,336	_0%
_	Life of Insurance		
•	Does filing only apply to certai	in territory (territories) or	certain
	Classes? If so,		
	specify: No		
	Brief description of filing. (If fil	ling follows rates of an ag	dvisory
	Organization, specify	mig ronomo ratos er air a	a (100.)
	organization):	Revise LPMP Vehicle	Rating Factors to match ISO's
	revisions in Designation #PP-2011-		
	*Adjusted to reflect all prior rat	te changes.	, , , , , , , , , , , , , , , , , , , ,
	**Change in Company's premi		t from application of new
	rates.		
		Eidelity National Pr	operty & Casualty Insurance co.
		· · · · · · · · · · · · · · · · · · ·	ne of Company
		Barb Rosemann - S	• •
			Official – Title

FORM (RF-3)

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **	
1.	Automobile Liability Private Passenger			
_	Commercial	<u> </u>		
2	Automobile Physical Damag		•	
	Private Passenger			
_	Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6. -	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage			
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			
15.	Other Manufactured Home Life of Insurance	\$919,506	+19.9%	
•	Does filing only apply to certain territory (territories) or certain Classes? If so, specify:			
	Brief description of filing. (If filing follows rates of an advisory			
	Organization, specify			
	organization): With this filing, Allstate is proposing an overall rate leve			
	change of 19.9% for the Illinois Allstate Indemnity Company (AI) Manufactured Home program.			
	This change will be applied through the adjustment of Base Rates.			
	*Adjusted to reflect all prior rate changes.			
	**Change in Company's premium level which will result from application of new			
	rates.			
		Allstate Indemni		
	. <u> </u>	<u></u>	lame of Company	
			Official - Title	

FORM (RF-3)

Change in Company's p	premium or rate	level produced	by rate revision
effective September 15, 2011			• •

.w.	(1) Coverage	(2) Ännual Premium Volume (Illinois) *	(3) Percent Change (+or-) **	
	Automobile Liability Private	A A A A A A A A A A A A A A A A A A A		
	Passenger		A CONTRACTOR OF THE CONTRACTOR	
	Commercial		Approximate page 4 degrees and the control of the c	
)	Automobile Physical Damag			
	Private Passenger			
	Commercial			
	Liability Other Than Auto			
:.	Burglary and Theft			
,	Glass	<u> </u>		
j.	Fidelity			
	Surety		· · · · · · · · · · · · · · · · · · ·	
	Boiler and Machinery			
	Fire			
0.	Extended Coverage	<u> </u>		
1.	Inland Marine			
2.	Homeowners	<u> </u>		
3.	Commercial Multi-Peril			
4.	Crop Hail			
5.	Other Mortgage Guaranty Insurance	\$40,241,895.59	None	
	Life of Insurance			
\$.	Does filing only apply to certain territory (territories) or certain Classes? If so, specify:			
	Brief description of filing. (If filing Organization, specify organization): Single Premium Rates and expand our Specify	The purpose of this rate fili	ng is to revise our	
	*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates.			
		- Radian-Guaranty Ir)G ····	
		Nar	ne of Company	
		Deann Hall, Implem		
		C	Official - Title	

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate level produced by rate revision effective			10/01/2011	
	(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
1.	Automobile Liability Private			
_	Passenger Commercial			
2.	Automobile Physical Damage			
_	Private Passenger Commercial			
	Liability Other Than Auto			
4.	Burglary and Theft			
	Glass _			
	Fidelity			
	Surety			
	Boiler and Machinery			
	Fire			
	Extended Coverage Inland Marine			
	Homeowners			
	Commercial Multi-Peril			
	Crop Hail			
	Other Other Liability	562765	7.3%	
	Line of Insurance	002.00		
Brie		erritories) or certain classes? If so, specify		
	djusted to reflect all prior rate changes. Change in Company's premium level wh	ich will result from application of new rate		
		Liberty Ins	surance Underwriters, Inc. Name of Company	
			Name or Company	
		Jill Schroeder	State Filings Analyst Official – Title	
	Real Estate	Appraisers Fr	Peof. Liab.	

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	te level produced by rate revision
effective 09/01/2011	

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **	
	Automobile Liability Private			
	Passenger		,	
	Commercial			
	Automobile Physical Damag			
	Private Passenger		•	
	Commercial			
	Liability Other Than Auto			
	Burglary and Theft			
	Glass			
	Fidelity			
	Surety			
	Boiler and Machinery			
	Fire			
١.	Extended Coverage			
	Inland Marine			
	Homeowners			
i.	Commercial Multi-Peril			
١.	Crop Hail			
),	Other Personal Umbrella	662,032	0.0%	
	Life of Insurance			
•	Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No			
	Brief description of filing. (If filing follows rates of an advisory Organization, specify			
	organization): Illinois Former S.B. 1716	Rule Revision - revisio	n to rule 2 in response to	
	minuis rumer 3.b. 1/10			
	*Adjusted to reflect all prior ra **Change in Company's prem rates.		It from application of new	
		Amica Mutual Insu	rance Company	
			mo of Company	

Name of Company
Brenda D. Miller, Sr. Compliance & Filing Analyst

Official - Title